

A Multipronged Approach to Improving ED Throughput

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The Current Environment of Healthcare Requires EDs to work Faster & Smarter with Increased Volume

Purpose: Improve ED Throughput by incorporating all members of the care team

Method: Monthly ED Taskforce meetings to review metrics and develop innovative strategies for improvement

Results/Outcomes: Decreased Overall LOS, LWBS Rate & Admit Time while Volume Increased

Implications: Significant improvement in patient experience and care as well as business functionality using a multipronged approach with all members of the care team

Nursing

- Bridges Team: Inpatient & ED RN Collaboration
- KUDOS card: Performance recognition of Inpatient staff by ED
- Admission/Discharge RN implementation
- Nursing Director shared ED Throughput Performance Evaluation Goals
- Education: Mandatory ESI training, Telemetry transport training for Nurse Techs, Internalization of Throughput Metric significance for staff

Provider

- Early Rounding on Inpatient Discharges
- Admitting Hospitalists assigned to ED
- Shared Throughput Performance Evaluation Goals among Hospitalists & ED providers

Ancillary

- Lab: ED specimen prioritization, Specimen turn around time reporting & time reduction strategies
- Radiology: Radiology initiated patient transport, Imaging turn around time reporting & time reduction strategies
- Registration: Flexibility in Stat, Bypass & Bedside Registration, Bedside Discharge Implementation
- Patient Experience: ED stationed Patient Advocates, Utilization of Volunteers focused on flow

Front

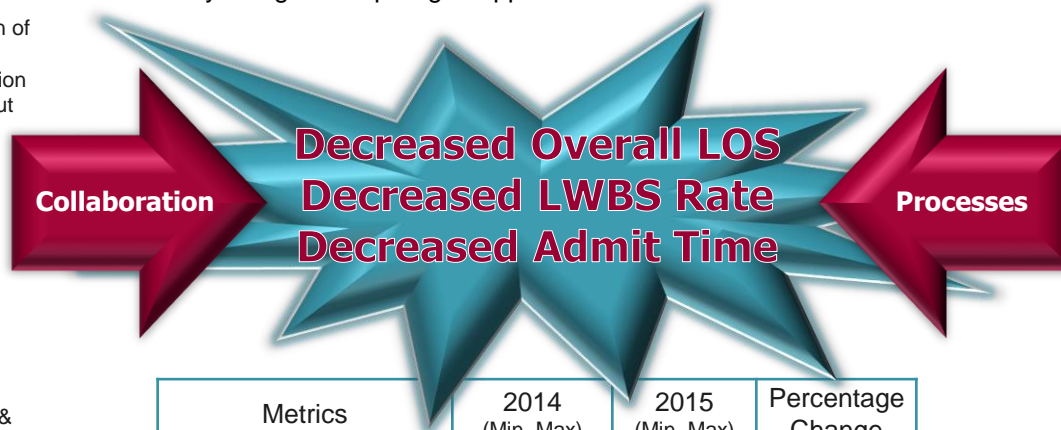
- Utilization of first nurse in lobby
- Updated RN-initiated protocols
- Triage bypass for ESI 4 & 5 patients
- Pre-assigned bedding, collaboration between first nurse and flow coordinator
- Implementation of pagers for lobby patients

Back

- Volume based ED Staffing Pattern
- Mid-level provider limited medication dispenser access
- Admission/Discharge Visual Identification for Team Approach
- Flow worksheet for Behavioral Patients
- Surge Indicators and Reaction Plan

Space

- Triage Room Standardization
- Workflow directed supply reorganization
- Repurposed space for decompression of waiting room opened during peak volume



Metrics	2014 (Min, Max)	2015 (Min, Max)	Percentage Change
ED Volume (Monthly Avg)	4997.25 (4104, 5869)	5723.67 (5075, 6029)	15%
Overall LOS (ED Arrival to ED Dispo, Monthly Avg, minutes)	220.92 (195, 255)	201.17 (186, 221)	- 9%
LWBS Rate (Monthly Avg, Percentage)	4.16 (1.94, 7.44)	2.83 (1.22, 4.63)	- 32%
Admission Time (ED Admit Decision to ED Dispo, Monthly Avg, minutes)	123.56 (102, 139)	97.75 (81, 131)	- 21%

ED: Emergency Department
 ESI: Emergency Severity Index
 LOS: Length of Stay, LWBS: Left without Being Seen
 Avg: Average, Dispo: Disposition